

A national framework for health promoting schools (2000 - 2003)

National Health Promoting Schools Initiative



Logo

Commonwealth
Department of Health and
Family Services



Australian Health
Promoting Schools
Association

Foreword

The health-promoting school is a global concept relevant to achieving health and education as expressed in the United Nation's goals of "Health for All" and "Education for All". Because these goals are inseparably linked, they can and must be achieved together. This will require concerted action, enhanced cooperation and new partnerships between health and education agencies, non-governmental organisations and the private sector.

While we expect our schools to be places of learning, the role we expect them to play in health is not as clearly defined. If our schools could promote *health* as they do learning, holistically and with all the measures available, the benefits both today and to future generations would be very significant - both in terms of health and education. To achieve education and health goals, our schools must be able to promote health as they do learning.

We know that healthy children learn well. If they are healthy, young people can take full advantage of every opportunity to learn. Also, we know that schools cannot achieve their full potential as places of learning if children who attend school are not capable of learning well. Additionally, we know that, for better or worse, schools influence health. This, in turn, either now or in the future affects the school's potential to educate and the potential impact of investments in education. We can improve the yield of educational investments if we can help schools to become health-promoting schools. I believe that the concepts of the health-promoting school can help provide vision and direction for creating a framework for policy and actions that can strengthen both education and health.

To create such a framework policy-makers, community leaders, teachers, parents and students need to be convinced of the relevance of health promotion to the overall goals and purposes of the school. These key stakeholders need to know what additional gains can be received through investments in health promotion and what it will take to enable schools to promote health.

The health-promoting school creates health by enabling young people to care for themselves and for others, to make decisions and have control over their health and life circumstances, and by ensuring that the society they live in creates conditions that allow the attainment of health by all its members. The extent to which a nation's schools become

"health-promoting schools" will play a significant role in determining whether the next generation is educated and healthy.

The development of a national framework and its future implementation are critical steps in making the health-promoting school vision a national reality.

Jack T. Jones

Department of Health Promotion

World Health Organisation, Geneva, Switzerland

Acknowledgments

The Australian Health Promoting Schools Association (AHPSA) was commissioned by the Commonwealth Department of Health and Family Services in 1997 to develop this framework. In the process of its development a number of key individuals and organisations were involved. We wish to acknowledge the support and assistance of these people and organisations, including:

- National Council members of Australian Health Promoting Schools Association
- National Consultative Forum representatives
- Commonwealth Department of Education, Training and Youth Affairs
- Dr Louise Rowling (Past President, AHPSA)
- Ms Sandra Killick
- Dr Jeff Northfield
- Ms Marilyn Wise
- Ms Sue Cooke
- Ms Jenni Moss
- National Health Promoting Schools Initiative Strategic Planning Group, and State Project Advisory Teams
- Australian Parents' Council
- State based Federation of Parents and Citizens
- Australian Council of State School Organisations
- Royal College of Nursing
- Divisions of General Practice

Assoc. Professor Donald E. Stewart
President, Australian Health Promoting Schools Association

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1. Introduction

Purpose of this document

The purpose of this document is to provide a framework to guide interaction between the health and education sectors in order to promote health gains for children and young Australians. In particular it is designed:

- to enhance coordination between the education and health sectors, and between different levels of government and the non-government sector
- to guide policy and infrastructure development at a national, state and local level
- to set priorities to inform national, state and local planning and guide strategies, programs and initiatives
- to promote sustainable national and state health-promoting school activity and strengthen community-based involvement.

This document builds on the National Health and Medical Research Council (NHMRC) report, “Effective school health promotion: Towards health-promoting schools”¹ and on Commonwealth Department of Health and Family Services commissioned research and consultations undertaken during the National Health Promoting Schools Initiative².

What is a health-promoting school?

“A health-promoting school is a school that is constantly strengthening its capacity as a healthy setting for living, learning and working.”³

Health-promoting school communities make a positive contribution to health and learning outcomes through the interrelationship of three important areas: curriculum, teaching and learning practices; school organisation, ethos and environment; and partnerships and services. Figure 1 below, provides a model illustrating these components of the health-promoting school concept.

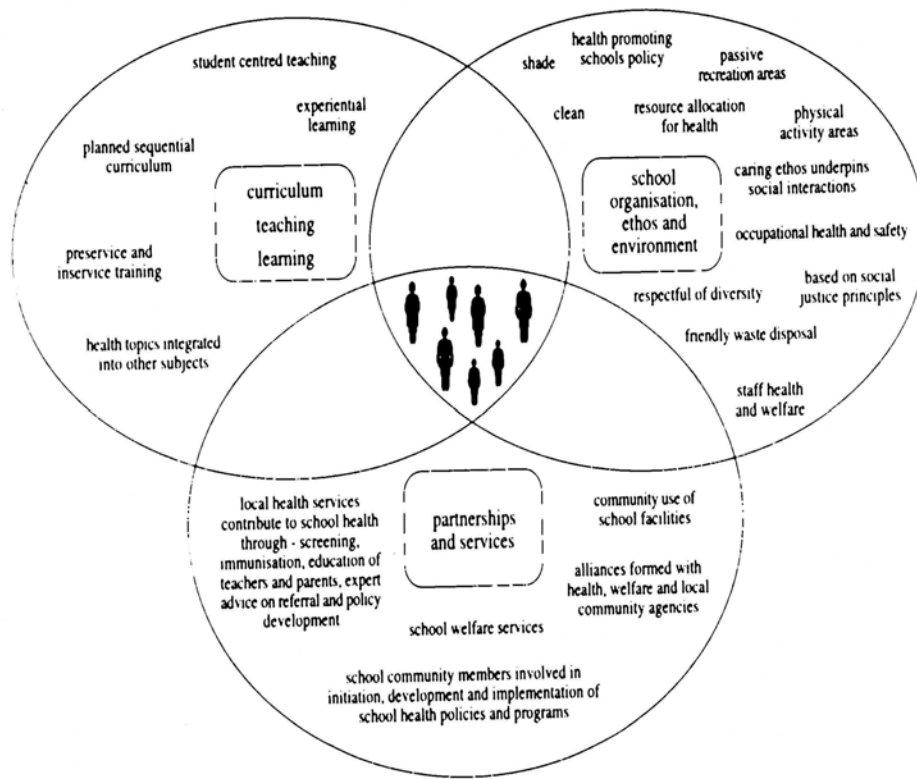


Figure 1: Health-Promoting Schools Model

How does a health-promoting school contribute to health and learning outcomes?

According to the World Health Organisation³, to achieve its goals a health-promoting school

- fosters health and learning with all the measures at its disposal
- engages health and education officials, teachers, students, parents and community leaders in efforts to promote health
- strives to provide a healthy environment, school health education, and school health services along with school/community projects and outreach, health promotion programs for staff, nutrition and food safety programs, opportunities for physical education and recreation, and programs for counselling, social support and mental health promotion
- implements policies and practices that respect an individual's well-being and dignity, provides multiple opportunities for success, and acknowledges good efforts and intentions as well as personal achievements
- strives to improve the health of school personnel, families and community members as well as students; and works with community leaders to help them understand how the community contributes to, or undermines, health and education.

2. A rationale for the health-promoting school approach

The health of adult Australians is shaped by the circumstances experienced and patterns established in early life, including prenatally and during childhood and youth⁴. There is currently a high level of interest internationally in the potential for health gain through strategic investment in the health of children and young people. School-aged children and young people are a key target group in relation to a range of National Health Strategies auspiced by the National Public Health Partnership including:

- | | |
|--|--|
| Healthy Growth and Development Strategies | <ul style="list-style-type: none">• National Public Health Nutrition Strategy• Acting on Australia's Weight Strategy• Eat Well Australia• Developing an Active Australia (and Active Australia – Schools Program)• National Drug Strategy• National Alcohol Action Plan• National Tobacco Strategy |
| Preventing Communicable Diseases | <ul style="list-style-type: none">• National HIV/AIDS Strategy• National Immunisation Program |
| Mental Health Strategies | <ul style="list-style-type: none">• National Youth Suicide Prevention Strategy• National Mental Health Strategy (and the National Mental Health Promotion in Schools Project - "MindMatters") |
| Prevention of Chronic Diseases | <ul style="list-style-type: none">• National Diabetes Strategy• National Cancer Strategy• National Asthma Action Plan |

The health-promoting school approach provides an integrating and coordinating framework for action through which to build a stronger foundation of health literacy and skills, and effectively address key health issues at individual, community and population levels.

There is a convincing weight of evidence to support the health-promoting school approach as a “best practice” framework for school health promotion, and for intersectoral collaboration for health in schools^{1,2,3,5}.

The health-promoting school approach links health and education; is evidence-based; recognises and builds on the social determinants of health; is cost effective; offers opportunities for coordinated and integrated responses; and recognises schools as key agents of socialisation and settings for health development.

Health and education are inseparably linked

The link between education and health is well established¹⁻⁹.

Children’s health status (physical, mental and emotional) impacts on their learning outcomes. Equally, education is a prerequisite for health, and research has demonstrated associations between years of schooling and maternal and child health^{1,7}.

Early school leaving is also associated with risk behaviours such as smoking, risk conditions such as obesity, and chronic diseases in adulthood such as cardio-vascular disease.

Throughout the world, higher levels of education are associated with better employment, healthier lifestyles, and higher levels of family and community well-being⁷.

Evidence supports a health-promoting school approach

The adoption of a health-promoting school approach was recommended by the National Health and Medical Research Council in 1996¹. This report examined the evidence concerning school health programs in order to identify necessary criteria for successful health promotion in schools. It concluded that

“the evidence points overwhelmingly to the adoption of comprehensive and integrated approaches to teaching and learning, which foster teams within the school and in the local community, and which support

healthier behaviours by addressing the physical and psychosocial environment of the school, through supportive policies and practices”.

A recent report into the effectiveness of school-based health promotion interventions⁵ reported on two systematic reviews. The study found that, although limited numbers of studies are available yet, the evidence to support the health-promoting school initiative is promising.

Positive impacts were shown in relation to the social and physical environment of the school, staff development, school lunch provision, exercise programs, aspects of health related behaviour such as dietary intake, and aspects of health such as fitness.

The report also found evidence that the approach is able to impact positively on aspects of mental and social well-being such as self esteem and bullying, which have previously proved difficult to influence. In the review of other school health promotion initiatives, the study concluded that:

*“Overall, a multifaceted approach is likely to be most effective, combining a classroom program with changes to the school ethos and/or environment and/or with family community involvement. **This is consistent with the health-promoting schools approach.**”*

Social and economic circumstances impact on the health of children and adolescents

People’s social and economic circumstances strongly affect their health throughout life, and factors operating early in life including the childhood period, have long-standing influences on risk of disease and other adverse consequences in middle life.

Children and adolescents (and their families) who experience poverty, family stress or social exclusion through unemployment, job stress or insecurity, exposure to alcohol, tobacco and drug use, who lack access to healthy food, healthy transport and strong supportive social networks have poorer health outcomes than those who do not have these experiences⁴.

While the factors which influence many risk conditions are largely external to the school environment, schools can contribute to individual and community resilience by increasing the health literacy and understanding of young people. Health-promoting schools can increase students' capacity to influence their environment and to take responsibility for the life decisions they make.

Health education and promotion strategies are cost effective

Appropriate health and education programs save significant amounts of money in the long term. For example, each additional year of secondary education attained reduces the probability of public welfare dependency in adulthood by 35 percent¹.

A World Bank Report⁷ cited strong economic evidence of the cost effectiveness of tobacco education; drug and alcohol education; and education to prevent early and unprotected sex.

Schools and teachers are key agents of socialisation and are integral to the health of students

Teachers are key figures in the lives of children, youth and local communities, are often in a position to facilitate the development of resilience, and can have a favourable impact on children's lives¹¹.

Health education programs are consistently more effective when they are delivered by trained teachers operating with adequate curriculum time and resources; and where the programs are supported by the school community¹.

Principles of effective educational reform guiding contemporary innovation in education (including middle schooling reform), are consistent with the health-promoting school approach, encouraging practice which:

- assists teachers to work in teams
- communicates coherent theories of educational change
- features skills to develop social and physical environments and the school-community interface

- is responsive to the varying health needs of students
- enables teachers to exercise autonomy over curriculum development
- creates a climate of self review in schools with the aim of creating learning organisations capable of continuous improvement
- equips teachers with skills to engage students in the curriculum and employ whole school strategies when appropriate¹².

**Integrated approaches
for health service
delivery are needed to
address the underlying
causes of health
problems**

The health-promoting school approach is a way to:

- coordinate and add value to the wide range of contributions schools already make to the health outcomes of their communities
- integrate vertical programs on single issues for example, drugs and physical activity into a well planned, sequential and developmental approach
- ensure that health issues make sense in the learner's context and increase students' self efficacy/action competence^{13,14}
- provide flexibility for schools to address their immediate and changing priorities
- strengthen current education and health initiatives and provide a coherent framework for school improvement.

3. A vision and the principles of health-promoting schools

The following vision statement and guiding principles were developed by the Australian Health Promoting Schools Association through a consultative process with input from all States and Territories as part of the National Health Promoting Schools Initiative in 1997.

Vision statement for health-promoting schools in Australia²

All children in Australia will belong to school communities which are committed to promoting lifelong learning, health and well-being.

Guiding principles of health-promoting schools²

This vision is based on the following principles:

Health and learning	Good health supports lifelong learning, living and well-being.
Supportive, safe environment	Students grow and learn in a safe, caring, responsive and empowering environment.
Holistic (ecological) approach	Health-promoting schools view health holistically, addressing the physical, social, mental, intellectual and spiritual dimensions of health through comprehensive programs.
Social justice	Equal access to education opportunities by male and female students from all population groups is essential for promoting quality of life.
Linking curriculum, environment and community	Health-promoting schools ensure a coordinated, comprehensive approach to learning by linking curriculum with the school ethos/environment and the community.
School community engagement	Health-promoting schools are inclusive - the whole school community of students, parents, staff and local agencies are engaged in school activities.
Respect for all	Active participation is based on respecting skills, values and experiences of parents, students, staff, and members of the school community.

Staff and parent well-being	Staff and parent well-being is integral to health-promoting school activity.
Active participation and empowerment	Individuals and the community are empowered through collaboration, participatory decision-making and personal action.
Partnerships	Partnerships result in action which is more effective, efficient and sustainable.
Health literacy	Addressing health literacy is an important component of a health-promoting school.
Diversity	The contribution of diverse cultures and groups is sought, welcomed, supported and valued.

4. A framework to support health–promoting schools

The National Health Promoting Schools Initiative developed a structure consisting of eight Key Action Areas and Priority Outcomes, together with associated Strategic Recommendations and Priority Outcome Indicators. These have been set out below in terms of:

1. Advocacy, promotion and publicity
2. Partnerships, collaboration and networking
3. Policy development
4. Seeking equity and valuing diversity
5. Workforce
6. Curriculum development, implementation and evaluation
7. Research
8. Monitoring and evaluation.

Key Action Areas and Priority Outcomes	Strategic Recommendations	Priority Outcome Indicators
<p><i>Advocacy, promotion and publicity</i></p> <p>Priority Outcome 1</p> <p>Intersectoral governmental and community endorsement and support for health-promoting schools</p>	<ul style="list-style-type: none"> ▪ That appropriate steps be taken to secure and publicise governmental endorsement of the health-promoting school approach, intersectorally, at national, state and territory levels ▪ That communications and marketing strategies be implemented, targeting key stakeholder organisations, schools and their communities, government advisers and politicians at all levels ▪ That structural support and resources be provided for implementing health-promoting schools eg funding for: <ul style="list-style-type: none"> • appointment of health-promoting school coordinators nationally, and in each state and territory • state and territory forums for sharing good practice, continuing discussion and debate • documentation and dissemination of successful health-promoting school practice from a variety of educational settings 	<p>National, state and territory intersectoral endorsement of the health-promoting school approach</p> <p>National Public Health Partnership endorsement of the national Health-Promoting Schools Framework</p> <p>Key partners (eg education sector, parents organisations) advocate publicly for health-promoting school approach</p> <p>Resources provided, eg. for national, state and territory coordination</p> <p>Health-promoting schools representation in relevant national state and local working parties</p>

Key Action Areas and Priority Outcomes	Strategic Recommendations	Priority Outcome Indicators
<p><i>Partnerships, collaboration, and networking</i></p> <p>Priority Outcome 2</p> <p>Establishment of health-promoting school partnerships which are transparent, accountable, culturally diverse and mutually beneficial, and within which resources, skills and expertise are shared.</p>	<ul style="list-style-type: none"> ▪ That key partners are supported to identify appropriate involvement, capacity and resources as a basis for negotiating intersectoral agreements eg Memoranda of Understanding, Joint Ministerial Statements ▪ That existing funding structures be explored with a view to form collaborative partnerships to advance health-promoting school development ▪ That funding be provided to support collaborative dialogue and networking between local, state and national partners 	<p>Intersectoral and governmental agreements between key partners at federal, state and local levels supporting health-promoting school planning and action (including Memoranda of Understanding)</p>

Key Action Areas and Priority Outcomes	Strategic Recommendations	Priority Outcome Indicators
<p><i>Policy Development</i></p> <p>Priority Outcome 3</p> <p>The health-promoting school approach or framework is incorporated in relevant national, state and local policy, developed by the education and health sectors and other key partners</p>	<ul style="list-style-type: none"> ▪ That relevant health and education policy at national, state/territory and local levels specifically articulates with, and promotes, the health-promoting school concept ▪ That the health-promoting school approach is used as a “best practice” benchmark by key partners and schools when: <ul style="list-style-type: none"> • developing new policy • reviewing existing policy 	<p>Relevant key partner policies reflect and promote a health-promoting school approach at national, state/territory, and local levels.</p>

Key Action Areas and Priority Outcomes	Strategic Recommendations	Priority Outcome Indicators
<p><i>Seeking equity and valuing diversity</i></p> <p>Priority Outcome 4</p> <p>Equitable access to information, resources and culturally safe support, to develop health-promoting school approaches to education</p>	<ul style="list-style-type: none"> ▪ That significant funding for health-promoting school activity (including evaluation) be provided to support research and implementation of health-promoting school strategies which may be: <ul style="list-style-type: none"> • employed within traditional and other indigenous communities and address differing cultural views (of health and education) • adopted in remote and isolated settings • developed to address gender specific health issues • adopted in settings with multicultural populations • developed to address health needs of students with special needs. ▪ That funds are made available to pilot community-based approaches that support students in accessing local community resources, agencies and services ▪ That membership of relevant intersectoral working parties is monitored to ensure equitable representation of key partners 	<p>Funding criteria and distribution support health-promoting school development, evaluation and reporting in groups and locations experiencing high levels of health and educational disadvantage</p>

Key Action Areas and Priority Outcomes	Strategic Recommendations	Priority Outcome Indicators
<p>Workforce</p> <p>Priority Outcome 5</p> <p>Quality health-promoting school training and resources are available for relevant health and education professionals and the community</p>	<ul style="list-style-type: none"> ▪ That the development and delivery of health-promoting school training, which is informed by contemporary theories of learning, educational change, and school-based practice should be coordinated, supported and resourced ▪ That national, state and territory education and health departments and the tertiary education sector: <ul style="list-style-type: none"> • support pre-service and in-service health-promoting school training programs for health and education professionals and other members of school communities (eg. parents, students, health staff) • encourage use of health-promoting school approaches in reforming school organisational structures and processes • sanction the place of staff well-being in the workplace/ school, and address it through health-promoting school approaches ▪ That at the school level, time and resources are made available to enable a critical mass of school community members to engage in health-promoting school professional development including: <ul style="list-style-type: none"> • school-based reflection on practice, and action in relation to curriculum teaching and learning, school ethos, environment and organisation, and school community partnerships and service links (eg. action research 	<p>Health-promoting school principles/ theory built into existing and new purpose-specific training programs for education and health professionals</p> <p>Cross section of partners receive professional development</p> <p>Increased health-promoting school activity in school communities</p> <p>Qualitative and quantitative workplace changes are reported</p> <ul style="list-style-type: none"> • eg. staff satisfaction/ well-being indicators improve (reduced sick leave, workers' compensation claims) • increased community involvement / engagement in school health promotion activity • a participatory team approach is taken to school initiatives

Key Action Areas and Priority Outcomes	Strategic Recommendations	Priority Outcome Indicators
	<p>process)</p> <ul style="list-style-type: none"> • use of health-promoting school principles to review and revise school organisation, management decision-making and operating practices • partnerships with education and health researchers 	

Key Action Areas and Priority Outcomes	Strategic Recommendations	Priority Outcome Indicators
<p><i>Curriculum development, implementation and evaluation</i></p> <p>Priority Outcome 6</p> <p>A health-promoting school approach is adopted in relevant national, state and local health education programs (including funded topic-specific health programs, eg. HIV/AIDS, alcohol and drug education, nutrition and physical activity programs) and pre-service and in-service training in school health curriculum issues for teachers and school health professionals</p>	<ul style="list-style-type: none"> ▪ That a health-promoting school approach be adopted in development of national and state/territory health education programs (eg. the health-promoting school framework informed the development of the Mental Health Promotion in Secondary Schools program, “MindMatters”, and the National Nutrition Education in Schools project, and should inform future programs such as alcohol and drug initiatives) ▪ That support be provided for: <ul style="list-style-type: none"> • mapping existing curriculum support for the health-promoting school approach identifying links with other innovative educational initiatives eg. middle school initiatives, cross-curricular programs or full service school approaches • analysis and dissemination of information including examples of good practice • coordinated and collaborative development of health-promoting school evaluation approaches and strategies for state and national audiences • reorientation of teacher education on health issues to a health-promoting school approach • reorientation of health professional education related to school health programs to a health-promoting school approach 	<p>Relevant national and state/territory education and health projects utilise a health-promoting school approach</p> <p>Health professional and teacher education courses utilise and support a health-promoting school approach</p> <p>Curriculum programs reflect the health needs of the community</p>

Key Action Areas and Priority Outcomes	Strategic Recommendations	Priority Outcome Indicators
	<ul style="list-style-type: none"> • school-level implementation and evaluation of health-promoting school processes including collaborative curriculum development with the school community which reflects local health needs and issues identified by school students 	

Key Action Areas and Priority Outcomes	Strategic Recommendations	Priority Outcome Indicators
<p>Research</p> <p>Priority Outcome 7</p> <p>Establishment of an appropriate five to ten year research program guided by the findings of baseline research conducted during the National Health-Promoting Schools Initiative (1997)</p>	<ul style="list-style-type: none"> ▪ That coordinated research partnerships be established with appropriate bodies eg. Australian Health Promoting Schools Association, National Public Health Partnerships, Australian Institute of Health and Welfare, National Health and Medical Research Council, and universities ▪ That a national health-promoting school research clearinghouse be established to provide nationally coordinated technical support/ advice to states and territories in relation to research, monitoring and evaluation. ▪ That research be commissioned to collaboratively develop/ identify: <ul style="list-style-type: none"> • data collection systems for child and youth health status and health behaviour monitoring • baseline data on key determinants of child/youth health and the impact on learning • health-promoting school indicators • the efficacy, feasibility and cost effectiveness of the health-promoting school approach in the Australian context including: <ul style="list-style-type: none"> • the impact of school community factors on health and education outcomes • minimum levels of resources and services necessary 	<p>An advisory body and coordinated research partnerships established with appropriate bodies</p> <p>Five to ten year research program designed and funding committed</p> <p>National, state/territory and local health-promoting school research increases</p> <p>Indicators developed and trialed</p>

Key Action Areas and Priority Outcomes	Strategic Recommendations	Priority Outcome Indicators
	<p>to establish health-promoting schools</p> <ul style="list-style-type: none"> • what factors sustain and enhance health-promoting schools. ▪ That collaborative research activity including school level participatory and action research approaches and partnerships with local tertiary institutions and health agencies be supported 	

Key Action Areas and Priority Outcomes	Strategic Recommendations	Priority Outcome Indicators
<p><i>Monitoring and evaluation</i></p> <p>Priority Outcome 8</p> <p>Development of reporting and evaluation mechanisms to monitor health-promoting school practice, including degree of implementation, and effectiveness of the health-promoting school approach</p>	<ul style="list-style-type: none"> ▪ That the extent and nature of the implementation of the health-promoting school approach be monitored ▪ That support be provided for: <ul style="list-style-type: none"> • documentation of current and emerging health-promoting school practice • evaluation of the efficacy and feasibility of the health-promoting school approach, and the development and piloting of innovative evaluation approaches at national, state and local levels • development of reporting mechanisms including indicators, criteria, audit tools, relevant databases • participative local and school level monitoring and evaluation practice 	<p>Collaborative intersectoral monitoring and reporting occurs</p> <p>Implementation of the National Health-Promoting Schools Framework / action plan is reported</p> <p>Indicators, criteria and audit tools are developed and trialed across a variety of school settings</p>

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